



U. S. DEPARTMENT OF STA
U. S. EMBASSY SEOUL - C O N S - I V
UNIT 15550, A P O, A P 96205 U S A
32 SEJONGRO, CHUNGROKU, SEOUL 110-710 R O K

Date:

Offer of Employment

Case Number:

Name (P) :

Instructions: Please fill out this form by typewriter or in legible block letters in ink. Please answer all questions concisely and completely. Please start all answers on this sheet. If there is insufficient room please continue your answers on an attached sheet. Please have it notarized by a U.S. notary.

1. FULL NAME AND MAILING ADDRESS OF SUBJECT BEING OFFERED EMPLOYMENT:

2. JOB BEING OFFERED TO SUBJECT (TITLE, DUTIES, HOURS PER WEEK, SALARY, BENEFITS):

3. FIRM NAME, CONTACT PERSON, MAIL ADDRESS, TELEPHONE NUMBER, FAX NUMBER, EMAIL ADDRESS OF EMPLOYING FIRM:

4. BRIEF DESCRIPTION OF EMPLOYING FIRM'S BUSINESS ACTIVITY:

5. NUMBER OF EMPLOYING FIRM'S EMPLOYEES AND ANNUAL REVENUE:

6. HOW WAS SUBJECT INFORMED OF THIS JOB OFFER?

7. WHEN WILL SUBJECT BE ABLE TO TAKE THIS JOB?

I swear or affirm that I know the contents of this offer of employment signed by me and that the statements contained herein are true and correct.

Employer's signature, printed name and date

Subscribed and sworn or affirmed before me this ____ day of _____, 20____.